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Set	Items	Description
S1	58852	SEPSIS/DE
S2	4099	S1 AND DT=REVIEW
S3	2938	S2 AND PY<2000
S4	82	S3 AND (TREAT? OR THERAP?) AND (SYMPTOM?)
S5	72	RD S4 (unique items)

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07714751 EMBASE No: 1999207120

Strategies for the control of LPS-mediated pathophysiological disorders

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Drug Discovery Today (DRUG DISCOV. TODAY) (United Kingdom) 1999, 4/5 (209-221)
CODEN: DDTOF ISSN: 1359-6446
PUBLISHER ITEM IDENTIFIER: S1359644699013367
DOCUMENT TYPE: Journal; %%%Review%%%
LANGUAGE: ENGLISH SUMMARY LANGUAGE: ENGLISH
NUMBER OF REFERENCES: 108

Lipopolysaccharides released from Gram-negative bacteria after infection initiate an alarm response in the host, which has supposedly evolved to protect it. However, an exaggerated response leads to a cascade of pathophysiological events termed sepsis. In the USA alone, the annual number of deaths caused by sepsis (~70,000) is comparable with that caused by AIDS. The author describes the major advances of knowledge in this field and the attempts to convert this into successful %%%therapeutics%%%. Anti-endotoxin and anti-inflammatory agents have been disappointing, but new strategies might result in effective %%%treatments%%% in the forthcoming years.

07653686 EMBASE No: 1999141880

Regulation of the host response in sepsis: Cytokines and other mediators

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Current Anaesthesia and Critical Care (CURR. ANAESTH. CRIT. CARE) (United Kingdom) 1998, 9/5 (255-260)
CODEN: CCCAE ISSN: 0953-7112
DOCUMENT TYPE: Journal; %%%Review%%%
LANGUAGE: ENGLISH SUMMARY LANGUAGE: ENGLISH
NUMBER OF REFERENCES: 25

Sepsis is commonly seen on the intensive care unit and almost all patients that die following intensive %%%therapy%%% unit care have evidence of an infection. There have been recent definitions of sepsis and organ failure following a consensus meeting of interested physicians and scientists. The role of biochemical mediators in the signs and %%%symptoms%%% of sepsis are becoming increasingly complex and better understood. The contribution of such mediators to the morbidity and mortality of sepsis is currently under investigation and there is much interest in the ability of drugs directed towards modifying these responses to alter the outcome from sepsis. An understanding of the relative roles of such mediators, along with the mechanisms regulating the release and activity of such compounds, is essential to comprehend the recent developments in this important area of our practice.

06073370 EMBASE No: 1995103847

SIRS and sepsis

A SINDROME DE RESPOSTA INFLAMATORIA SISTEMICA E OS ESTADOS SEPTICOS

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Arquivos de Medicina (ARQ. MED.) (Portugal) 1995, 9/1 (45-52)

CODEN: ARQME ISSN: 0871-3413

DOCUMENT TYPE: Journal; %%%Review%%%

LANGUAGE: PORTUGUESE SUMMARY LANGUAGE: ENGLISH; PORTUGUESE

The authors revise the systemic syndrome of inflammatory response and septic states, drawing a particular attention to the septic shock. They discuss the clinic and the pathogenesis, describe the methods of monitoring, follow-up and of judgement of the %%%therapy%%% efficacy. The several aspects of the %%%therapy%%% are also focused: prophylaxis, antibiotherapy, immunomodulation and %%%symptomatic%%% control.

05775580 EMBASE No: 1994188129

Gram-negative bacterial sepsis and sepsis syndrome

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Surgical Clinics of North America (SURG. CLIN. NORTH AM.) (United States) 1994, 74/3 (621-635)

CODEN: SCNAA ISSN: 0039-6109

DOCUMENT TYPE: Journal; %%%Review%%%

LANGUAGE: ENGLISH SUMMARY LANGUAGE: ENGLISH

Gram-negative bacterial sepsis and septic shock remain significant causes of morbidity and mortality in hospitalized patients. Recent investigation in this area has served to better define the host response to these and other types of infection, a constellation of signs and %%%symptoms%%% that has been termed sepsis syndrome. Recent studies indicate that the mortality associated with this latter disease process is approximately 40%, despite administration of antimicrobial agents, hemodynamic monitoring and fluid resuscitation, and metabolic support. For this reason, the pathophysiology of this process is undergoing intensive examination, and attempts are being made to employ several new types of %%%treatment%%% modalities as adjunctive %%%therapy%%%. Although the initial antiendotoxin antibody trials have not demonstrated the efficacy of these reagents, these studies have provided extremely valuable information regarding appropriate trial design, the current epidemiology of sepsis syndrome (particularly in relation to the ensuing morbidity and mortality), and the pathophysiology of the host septic response and have highlighted the need for rapid, precise diagnostic assays. A number of other intriguing reagents, including anti-TNF-alpha antibody preparations, IL-1ra, bacterial permeability-increasing protein, TNF-binding protein, polymyxin B hemoperfusion, and lipid A analogues also are undergoing experimental and clinical testing in an attempt to reduce the mortality of this lethal disease process.

08946129 96334748 PMID: 8703620

Sepsis and cytokines: current status.

Blackwell TS; Christman JW

Division of Pulmonary and Critical Care, Vanderbilt University, Nashville, TN 37232-2650, USA.

British journal of anaesthesia (ENGLAND) Jul %%%1996%%%, 77 (1) p110-7, ISSN 0007-0912 Journal Code: AUO

Languages: ENGLISH

Document type: Journal Article; %%%Review%%%; Review, Academic

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Sepsis is a constellation of clinical signs and %%%symptoms%%% resulting from excessive systemic host inflammatory response to infection. This inflammatory response is largely mediated by cytokines, which are released into the systemic circulation. Plasma concentrations of specific cytokines, TNF alpha, IL-1 beta, IL-6 and IL-8 are frequently elevated in human sepsis and cytokine concentrations correlate with severity and outcome of sepsis. In addition to pro-inflammatory cytokines, soluble cytokine receptors, cytokine receptor antagonists and counter-inflammatory cytokines are also produced in large quantities in patients with sepsis; however, the specific role of these molecules in sepsis remains undefined. A complex interaction of cytokines and cytokine-neutralizing molecules probably determines the clinical presentation and course of sepsis. Intervening in this sequence of events to modify the host inflammatory responses may prove to be a beneficial %%%treatment%%% strategy for sepsis, but currently tested anticytokine %%%therapies%%% have been largely unsuccessful. (72 Refs.)

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